

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

FORMAL COMPLAINT

Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701

For Commission Use Only:

Case: 04-0270

INFORMAL **ORIGINAL**
COMPLAINT
2004-23056 S

Regarding a complaint by (Person making the complaint): BOBBY ALLEN

Against (Utility name): NICOR GAS

As to (Reason for complaint) OVERCHARGED BILL.

~~CHARGED AS COMMERCIAL INSTEAD OF RESIDENTIAL~~
SINCE APRIL 1988

in CICERO Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 3147 S 49th AVE

The service address that I am complaining about is 3147 S 49th AVE

My home telephone is [708] 656 4938

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [708] 218 6948

(Full name of utility company) NICOR GAS (respondent) ☒ is a public utility and is subject to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

280.75 REFUNDS

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

☒ Yes ☐ No

Has your complaint filed with that office been closed?

☒ Yes ☐ No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

1. SINCE APRIL 1988 NIGOR HAS OUR PROPERTY LISTED AS A COMMERCIAL PROPERTY. REPEATED CORRESPONDENCE HAS LED TO OUR PROPERTY FINALLY BEING RECOGNIZED AS RESIDENTIAL. ALL OF THESE YEARS WE HAVE PAID THE COMMERCIAL RATE AND FEEL A REFUND OF THE SIXTEEN YEARS OVERPAID IS DUE US.

MAKE NIGOR REFUND US THE OVERPAYMENT

Date:

10-5-2004

(Month, day, year)

Complainant's Signature

Bobby Allen

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

VERIFICATION

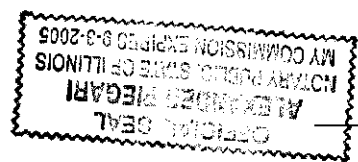
A notary public must witness the completion of this part of the form.

The contents of this petition are true to the best of my knowledge.
I, Bobby Allen

(Signature) Bobby Allen

Subscribed and sworn/affirmed to before me on (month, day, year) 10-5-04

Notary Public, Illinois



NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.